

No. C 129904	Due no later than Aug 31, 2009 Annual Report Form		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed. HOLLINGSHEAD EYE CENTER, P.C. MARK E. HOLLINGSHEAD, M.D. 360 E MALLARD DR STE 125 BOISE ID 83706		MARK E. HOLLINGSHEAD, M.D. 360 E MALLARD DR # 110 BOISE ID 83706			
			3. <u>New</u> Registered Agent Signature:*			
4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).						
Office Held	Name	Street or PO Address	City	State	Country	Postal Code
DIRECTOR	LOUIS M PENNOW	360 E MALLARD DR STE 110	BOISE	ID	USA	83706
SECRETARY	LANA HOLLINGSHEAD	360 E MALLARD DR STE 110	BOISE	ID	USA	83706
5. Organized Under the Laws of: ID C 129904	6. Annual Report must be signed.* Signature: Louis M. Pennow, MBA Name (type or print): Louis M. Pennow, MBA		Date: 06/10/2009 Title: Administrator			
Processed 06/10/2009		* Electronically provided signatures are accepted as original signatures.				